



## Creating Opportunities to Flourish Through Inspirational Leadership

### Ferring's Pentasa Programme

The Pentasa Support Programme (PSP) is a service provided by Ferring to help patients get the most out of taking their mesalazine and in managing



their ulcerative colitis. Community pharmacy is ideally placed to ensure that patients are

aware of the programme and have the opportunity to register for support if they wish. Pentasa Patient Support Programme has been designed to inform and support any patient who has been prescribed Pentasa within the last six months. The benefits include supporting and encouraging the patient to maintain therapy, while helping them to learn how to manage their symptoms and understand more about their condition. Pentasa's once-daily license provides a simplified dosing regimen and its high dose formulations reduce pill burden, which may help patients who are unintentionally non-adherent. All Pentasa Oral formulations are licensed as OD for maintenance therapy and active disease. This includes the Pentasa 1g Tablet, and the 2g and 4g sachets. Pentasa Patient Support Service also helps patients who are intentionally non-adherent. By providing support and information, the service helps to reduce the chance of a patient making the decision not to take their medication. For more information on the programme read the [Pentasa Pharmacy Guide](#).

### Emergency Supply Audit

At this stage contractors will want to note that the two data collection periods have been agreed as Monday 9 March to Sunday 22 March 2015 (inclusive)

and Monday 23 March to Sunday 5 April 2015 (inclusive). **Community Pharmacy North Yorkshire agreed to partake in the audit between 23<sup>rd</sup> and 30<sup>th</sup> March 2015, with the inclusion of Maundy**

**Thursday.** Both of the audit periods will include two full weekends so that emergency supplies made when GP practices are closed can be assessed. The second period covers the Easter holiday and was selected to provide an opportunity to audit provision of emergency supplies during a peak period for healthcare provision. PSNC has stressed that this is a busy time for pharmacies and to help mitigate any potential risks to patient safety resulting from increased operational pressure they have secured agreement that the audit data collection should be as straightforward as possible to complete. To support this, **contractors undertaking the audit in the second two week period will be permitted a lag of up to two weeks post 5 April 2015** in which to complete the data collection retrospectively. PSNC believes that this will demonstrate the positive impact that pharmacy emergency supplies can have in reducing the demand for urgent and emergency services such as, out of hours GP care, NHS 111 and Emergency Departments.



The audit may also be useful in helping pharmacies to identify patients suitable for the repeat dispensing service. The aims of the audit are to understand:

- The reasons behind patients requesting/requiring an emergency supply
- The reasons why an emergency supply was not provided (where that was the case)
- The potential benefit to the patient if an emergency supply is provided
- The impact and/or patient's subsequent course of action had an emergency supply not been provided

For more information and helpful tips read [A guide to clinical audit](#).

## Reminder for Contractors to Report Safety Incidents

Since 2005, pharmacies have been required to record patient safety incidents in an incident log and report these to the National Reporting and Learning Service (NRLS) on a monthly basis. However, while recording



of dispensing errors and prescribing errors in pharmacies is an everyday occurrence in the majority of pharmacies, the number of incidents

reported to the NRLS has been very low. For help and information on the issue go to: <http://psnc.org.uk/contract-it/essential-service-clinical-governance/patient-safety-incident-reporting/>

## Primary Care Support Services Transformation Programme

On the 9 January 2015, NHS England confirmed that three companies have been shortlisted to bid to supply Primary Care Support Services:

- **Capgemini** – working with NHS South East Commissioning Support Unit (CSU)
- **Capita** – working with Anglian Community Enterprise (ACE)
- **Equiniti**.

Work will continue with each shortlisted bidder over the coming weeks to produce final bids. These will be evaluated and a preferred supplier and award of contract is expected in early spring. The PCS Services programme team and the Stakeholder Group have begun work to identify what is required for the

Intelligent Customer Function (ICF), which will carry responsibility for managing the NHS England contract.

The PCS Services continue to run as

normal. Although you may notice some changes locally, such as office relocations, these changes will not affect the service you receive.



## Pharmacy & Optometry

Pharmacy and optometry, working together with local GPs, can create many advantages in a local health hub. They both have premises in large numbers of community locations and have regular contact with patients that could be used to develop the prevention and self-help message in many areas. For more



information on the scheme and its advantages read the following documents:

- [How integrated working between Pharmacy and Optometry can support GPs](#)
- [10 Top Tips for Healthy Eyes and Good Vision](#)

## January 2015 Price Concessions

| Drug Name                                           | Pack Size | Price Concession |
|-----------------------------------------------------|-----------|------------------|
| Clonidine 0.25mg                                    | 112       | £6.99            |
| Digoxin 125mcg tablets (new)                        | 28        | £4.99            |
| Digoxin 250mcg tablets (new)                        | 28        | £4.99            |
| Digoxin 62.5mcg tablets (new)                       | 28        | £4.20            |
| Exemestane 25mg tablets                             | 30        | £39.99           |
| Lisinopril 20mg /Hydrochlorothiazide 12.5mg tablets | 28        | £8.90            |
| Pizotifen 0.5mg tablets                             | 28        | £6.50            |
| Pizotifen 1.5mg tablets                             | 28        | £5.99            |
| Tamoxifen 20mg tablets                              | 30        | £5.16            |
| Trandolapril 2mg capsules                           | 28        | £7.50            |
| Trimethoprim 200mg tablets (new)                    | 6         | £3.00            |
| Trimethoprim 200mg tablets (new)                    | 14        | £6.99            |

# North Yorkshire County Council

## Alcohol Strategy

The *North Yorkshire Alcohol Strategy 2014-2019* has been developed by *North Yorkshire County Council's* public health team in partnership with others. One of the priorities within the strategy is to identify and support those who need help through recovery. To do this *Public Health* will be working with pharmacies across North Yorkshire to increase the uptake and ensure the



effective delivery of *Alcohol Identification and Brief Advice* (IBA). IBA is, essentially, the delivery of short simple brief advice following identification (i.e. screening), not usually lasting longer than 5-10 minutes. Extended 'brief intervention' approaches may last more like 20 minutes and integrate brief motivational interviewing techniques. IBA however is most likely all that is required in most cases where an 'at-risk' drinker will be responsive. IBA is therefore the most simple, cost-effective approach to reducing risky but non-dependent drinking at an individual level. It is straightforward and is easily learnt by general healthcare workers or other non-alcohol specialists. Public Health will be working with pharmacies to implement this service and provide training in the next few months.



### CPPE

The Centre for Pharmacy Postgraduate Education (CPPE) has launched a new interactive e-learning programme on urgent care. The programme provides information and videos, and signposts users to useful links to support:

- Understanding of community pharmacy teams' role in urgent care

- The development of pharmacy services that could help relieve pressure on urgent care services
- Integration into local plans to improve the delivery of urgent and emergency care pathways.

A number of pharmacy organisations, including PSNC, are campaigning for local commissioners to make better use of community pharmacy services to support urgent care. PSNC has a page dedicated to this subject '[Community Pharmacy – helping provide better quality and resilient urgent care](#)', which has information on flu vaccination, emergency supply of medicines and a winter ailments service, three services that commissioners could consider to help relieve pressure on urgent care services. Find out more: [dld.bz/d3JTa](http://dld.bz/d3JTa). We all know the pharmacy profession is changing, and we must become more patient-facing in the future. Other health professions routinely include consultation skills in their training, and Health Education England (HEE) along with other CCGs, doctors and nurses require assurance that pharmacy is delivering high quality patient-focused consultations. There is a dedicated website that will provide you with easy access to a range of resources, including guidance, a set of practice

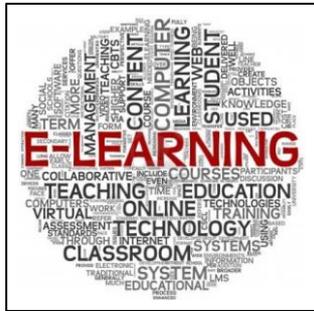


standards, learning options, assessment tools and signposting for additional support and finally, CPPE are providing both evening and full day workshops on consultation skills. The next evening event in North Yorkshire is February 23rd at York Science Park Innovation Centre, University road, Heslington, York, YO10 5DG. There will also be a full day session later in the year and you can find the full details on the CPPE website: [www.cppe.ac.uk](http://www.cppe.ac.uk)

### CPPE Urgent Care E-Learning

Urgent care is currently a very hot topic in the national and local press. We are constantly being told of an NHS in crisis. But what is the truth behind the headlines, and where can community pharmacy fit in? This new e-learning programme from CPPE discusses the evidence or lack of it behind the headlines, current NHS policy which clearly includes harnessing

the skills experience and accessibility of community pharmacists and points out that we have a wealth of knowledge and experience. The programme will take a couple of hours to complete and you can easily access it from your tablet device. Available to download from [www.cppe.ac.uk](http://www.cppe.ac.uk)



## CPPE Repeat Dispensing

The Centre for Pharmacy Postgraduate Education (CPPE) has launched a new [e-learning programme on repeat dispensing](#).

The programme is suitable for all pharmacists, pre-registration pharmacists and pharmacy technicians. It includes activities and case studies to explore repeat dispensing and will support users to:

- Provide a safe and efficient repeat dispensing service
- Explain repeat dispensing and its benefits to patients and prescribers
- Use paper-based and electronic repeat dispensing

This course has been designed to support community pharmacy teams in fulfilling the planned requirement for pharmacies to give advice to appropriate patients about the benefits of the repeat dispensing service, as part of a broader programme to increase use of the service. This requirement is due to be implemented in the community pharmacy contractual framework 2014/5 – PSNC is currently waiting for confirmation of when the Terms of Service will be amended to include this requirement. However, completion of the course will help ensure pharmacists and their teams are fully up to date on the repeat dispensing service when the changes are made to the Terms of Service. For further information on the changes to contractual requirements 2014/15 please read the [PSNC Briefing 015/14](#). All CPPE materials are available free of charge to pharmacists, pharmacy technicians and pre-registration pharmacists in England who are registered with the GPhC. For those with any questions about CPPE materials get in touch with,

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## Future LPC Meeting Dates

| Time (Open) | Day      | Date                             | Venue                           |
|-------------|----------|----------------------------------|---------------------------------|
| 1.45pm      | Thursday | 19 <sup>th</sup> March 2015      | Innovation Centre, York         |
| 1.45pm      | Thursday | 21 <sup>st</sup> May 2015        | Crown Hotel, Boroughbridge      |
| 6.30pm      | Thursday | 16 <sup>th</sup> July 2015 (AGM) | Crown Hotel, Boroughbridge      |
| 1.45pm      | Thursday | 17 <sup>th</sup> September 2015  | Harrogate, Yorkshire Showground |
| 1.45pm      | Thursday | 19 <sup>th</sup> November 2015   | Innovation Centre, York         |